

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | M. G     |        | 9/20/00  |
| O.I.P.E. CLASSIFIER       |          |        | 10-26-00 |
| FORMALITY REVIEW          |          | 71422  | 10-30-00 |
| RESPONSE FORMALITY REVIEW |          | 71422  | 1-09-01  |

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 - ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
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TITLE

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Form PTO-436  
 (Rev. 6/99)

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
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